



# Effective Health Care

## Psychiatric Hospital Discharge Nomination Summary Document

### Results of Topic Selection Process & Next Steps

- The topic on *Psychiatric Hospital Discharge* is not feasible for a full systematic review due to the limited data available at this time; however, it will be considered for a potential technical brief by the Effective Health Care (EHC) Program.
- To see a description of a technical brief, please go to <http://effectivehealthcare.ahrq.gov/index.cfm/research-for-policymakers-researchers-and-others/>.

### Topic Description

**Nominator(s):** Two health care professional associations and one individual nominated this topic jointly

**Nomination Summary:** The nominators want to know about the comparative effectiveness of different lengths of hospital stay and transition support services after discharge on various outcomes for individuals who have experienced repeated psychiatric hospital admissions.

#### **PICO from Nomination**

**Population(s):** Adults with repeated psychiatric hospital admissions and subgroups based on diagnosis (e.g., psychotic or mood disorders), demographics (e.g., elderly, homelessness, race/ethnicity, gender), and co-morbidities (e.g., co-occurring medical conditions, developmental disorders, or chemical dependency).

#### **Intervention(s):**

- Psychiatric hospitalization: ultra-short (1 to 4 days), short (5 to 6), longer (7 to 10 days), and stays beyond 10 days
- Transition support services after discharge (e.g., discharge services, follow-up calls, short-term case management, bridge visits, psychoeducation, referral to assertive community treatment)

#### **Comparator(s):**

##### *Psychiatric Hospitalization*

- Different lengths of stay compared with each other
- Alternatives to psychiatric hospitalization (e.g., partial hospitalization, crisis residential services, extended observation [including emergency department], intensive case management [ICM]), intensive outpatient treatment including outpatient commitment, Assertive Community Treatment [ACT])

##### *Transition support services after discharge:*

- Different transition support services compared with each other
- Transition support services compared with usual care

#### **Outcome(s):**

- Readmission rates

- Patient insight into illness
- Treatment adherence
- Housing stability
- Social support
- Remission
- Physical health outcomes
- Quality of life
- Clinical engagement
- Individual and family feelings about adequately addressing factors prompting the admission
- Individual and family felt the stay was sufficient to address safety and dangerousness concerns
- Satisfaction with care
- Relapse
- Treatment non-adherence
- Criminal justice encounters
- Suicide, suicide attempts, other self-injurious behaviors
- Homicide and other aggressive behaviors
- Relapse into substance use

**Key Questions from Nominator:**

1. For adults who have experienced multiple psychiatric hospitalizations, what is the comparative effectiveness of:
  - a. different lengths of hospitalization, and
  - b. hospitalization compared with alternatives to hospitalization?
2. For adults who have experienced multiple psychiatric hospitalizations, does the comparative effectiveness of different lengths of hospitalization and alternatives to hospitalization differ by subgroups?
  - diagnosis (e.g., psychotic or mood disorders),
  - demographics (e.g., elderly, homelessness, race/ethnicity, gender),
  - comorbidities (e.g., co-occurring medical conditions, developmental disorders, or chemical dependency)?
3. For adults who have experienced multiple psychiatric hospitalizations, what is the comparative effectiveness of different models of transition support services?
4. For adults who have experienced multiple psychiatric hospitalizations, does the comparative effectiveness of different models of transition support services differ by subgroups?
  - diagnosis (e.g., psychotic or mood disorders),
  - demographics (e.g., elderly, homelessness, race/ethnicity, gender),
  - comorbidities (e.g., co-occurring medical conditions, developmental disorders, or chemical dependency)?

## Considerations

- The topic meets EHC Program appropriateness and importance criteria. (For more information, see <http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/>.)
- Serious Mental Illness (SMI) presents significant health and economic burdens on individuals, their families, and society. SMI, most commonly referring to a diagnosis of psychotic disorders, bipolar disorder, and either major depression with psychotic symptoms or treatment-resistant depression, is a long-term illness involving substantial functional impairment over multiple symptom domains.
- The comparative effectiveness of short- and long-term psychiatric hospitalizations for persons with SMI and the circumstances surrounding hospitalization that promote positive patient outcomes and reduce harms remain unknown. In addition, there is uncertainty about the effectiveness of alternatives to psychiatric hospitalization and transitional support services after discharge.
- The evidence base consists of heterogeneous studies that do not comprehensively address the questions posed. A technical brief that maps the current evidence landscape and outlines the research gaps may help move the field forward.